

RTAP GRANT EVALUATION

	Name of Activity	Activity Date
1.	How did this training help you better perform the duties of your position or improve the services of your transit system?	
2.	Was there one aspect of the training that you could implement immediately?	
3.	Provide a brief summary of the training activity. (You can use the back of this form if needed).	
4.	How could the information you gained be shared with others?	
5.	Would you recommend this training for other transit system personnel?	

Signed _____
Name

Transit Agency